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CONFIRMATION NO. 1724

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|--|---|------------------------------------|---|--|
| <b>SERIAL NUMBER</b><br>10/505,475   | <b>FILING OR 371(c) DATE</b><br>08/24/2004<br><b>RULE</b>   | <b>CLASS</b><br>560                | <b>GROUP ART UNIT</b><br>1625   | <b>ATTORNEY DOCKET NO.</b><br>3165-105 |
| <b>APPLICANTS</b><br>Guido Mayer, Gonnheim, GERMANY;<br>Oliver Cullmann, Heppenheim, GERMANY;<br>Bernd Wolf, Fussgonheim, GERMANY;<br>Michael Keil, Freinsheim, GERMANY;   |   |                                    |   |  |
| <b>CONTINUING DATA *****</b><br>This application is a 371 of PCT/EP03/01160 02/06/2003<br><b>** FOREIGN APPLICATIONS *****</b><br>GERMANY 102 08 029.1 02/26/2002  |   |                                    |   |  |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b><br><b>** 03/01/2005</b>   |   |                                    |   |  |
| Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after<br>met<br>Verified and Acknowledged <input checked="" type="checkbox"/> Allowance<br>Examiner's Signature _____ Initials _____ |   | <b>STATE OR COUNTRY</b><br>GERMANY | <b>SHEETS DRAWING</b><br>0  | <b>TOTAL CLAIMS</b><br>26              |
| <b>INDEPENDENT CLAIMS</b><br>1   |   |                                    |   |  |
| <b>ADDRESS</b><br>6449   |   |                                    |   |  |
| <b>TITLE</b><br>Method for producing 2-chloromethylphenyl acetic acid derivatives  |   |                                    |   |  |
| <b>FILING FEE RECEIVED</b><br>1028   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                    | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |  |